

HYPEREMESIS GRAVIDARUM

(301)

PARTICIPANT TYPE.....PREGNANT WOMEN
HIGH RISK.....YES

RISK DESCRIPTION:

Severe nausea and vomiting to the extent that the pregnant woman becomes dehydrated and acidotic.

Presence of hyperemesis gravidarum diagnosed by a physician as self-reported by applicant, participant, or caregiver; or as reported or documented by a physician, or someone working under physician's orders.

ASK ABOUT:

- Coping strategies (dietary and other practices) that have been helpful or effective
- Attitude towards dietary supplementation
- Access to follow-up medical care

NUTRITION COUNSELING/EDUCATION TOPICS:

- Although nausea and vomiting are common early in pregnancy, some women experience severe nausea and vomiting. These women are at risk of weight loss, dehydration and metabolic imbalances.
- Reinforce any special diet instructions from her primary care provider.
- Offer suggestions for dealing with nausea such as:
 - Avoid foods that seem to trigger nausea (e.g., fried or greasy foods, spicy foods, foods of a certain texture).
 - Avoid cooking odors and other smells that trigger nausea by opening windows, turning on a fan, or asking someone else to take care of food preparation. For some women, the scent of sliced lemon can counteract other smells and help relieve nausea.
 - Eat foods that settle her stomach and calm the nausea. For some women, eating salty foods and drinking tart beverages (e.g., potato chips and lemonade) helps quell the nausea and allows them to eat other foods later in the day. Some women find it helpful to eat crackers or dry cereal before getting out of bed.
 - Avoid large fluid intakes in the morning.
 - Drink liquids between meals instead of with meals.
 - Eat several small meals throughout the day instead of three large meals.
 - Take prenatal supplement at night or before bedtime.

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NUTRITION COUNSELING/EDUCATION TOPICS (CON'T):

- The first goal is to manage the nausea and vomiting by eating whatever foods and beverages she tolerates. When that is achieved, review the basics of a healthy pregnancy diet based on MyPyramid.
- Review weight gain goal and weight gain pattern. If weight loss is a problem, discuss nutrient and calorie-dense food choices.
- If she is taking any non-prescribed supplements or targeted nutrition therapy products, advise her to discuss these products with her health care provider.

POSSIBLE REFERRALS:

- If she does not have access to follow-up medical care, refer her to a health care provider, the Optimal Pregnancy Outcome Program (OPOP) (<http://www.ndhealth.gov/opop/>), or the local public health department.
- If her weight gain continues to remain well below the recommended level, refer her to her primary care provider.